



# Medicaid And Long-Term Care Services for Adults

Explore:

- What help and options are available.
  - How to pay for long-term care, including how to apply for Medicaid.
  - The types of places you can live.
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Washington State  
Department of Social  
& Health Services

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**ADSA** Aging & Disability  
Services Administration

Medicaid  
And  
Long-Term  
Care Services  
for Adults

# You Have a Choice.

There are a variety of long-term care options available. Whether you have immediate decisions to make or are planning ahead, you will want to understand all of your options.

This booklet is also helpful if you are gathering information for a friend or family member.

This booklet is for people:

- wanting to understand more about what long-term care services and residential care facility options are available.
- 18 or older thinking about applying for Medicaid to help pay for their long-term care.

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# Long-Term Care Planning

Planning for your long-term care is like a roadmap. A roadmap gives you a clear picture of where you are and how to get to where you want to go. Having a long-term care roadmap will help you create the best route for your own life.

Here are four steps to help you start thinking about a long-term care plan.

- Step 1: Take a look at where you are today.
- Step 2: Think about what you might need differently tomorrow.
- Step 3: Find out what options are available to meet your needs.
- Step 4: Take action that moves you forward.

## Step 1

How are you doing today? Take a look at your day-to-day life. When you are taking an inventory of your life, keep in mind all the things that are working well. Take the time to define what you need for your own well-being.

## Step 2

Once you have a good snapshot of where you are today, think about what might happen to change what you need in the next days, months, and years.

This is a good time to sit down and talk with your loved ones about your thoughts, questions, issues and concerns about long-term care. Too often, people put off this conversation “for another day”. This leaves families caught unprepared when a medical or other life crisis happens. Trying to make long-term care plans during a crisis forces hurried and poorly informed choices and decisions.





Here are some helpful tips for talking about long-term care.

- Set aside time to talk when everyone is rested and prepared to be there without outside distractions.
- Allow each person to talk without interrupting or criticizing.
- Understand emotions can be a big part of this discussion.
- Be patient with the amount of time that may be needed to get everything out on the table.
- Everyone needs time to think about and process new information. Do not expect that everything will be sorted out after one conversation. Many small steps and conversations can be better than one huge leap that leaves everyone upset and confused.
- If helping a loved one, remember you are there for support. The decisions are his/hers to make – not yours.

### Step 3

By completing steps 1 and 2, you will have a clearer picture of your circumstances and what is important to you. It will also point out what additional information you need about long-term care options.

When investigating your long-term care options, there are two major categories to learn more about: services and care settings.

Services are the actual tasks that can be done to help you.

A care setting is where you live. The care setting can be your own home or a residential care facility. For more information on services, see page 3. For more information on residential care

facilities see page 8.

### Step 4

Long-term care planning can seem overwhelming until you become more aware of what is out there to help you. Take some small steps to get moving. You will be more comfortable once you become familiar with the terms and the process.

Services are tasks that can be done to help you.

A care setting is where you live.



Most of the initial information gathering begins on the telephone. It can be a time consuming process at first. Plan accordingly.

## Services to Help You at Home

A variety of long-term care services are available to help you get the care you need to stay in your own home.

### Finding out about services

There are many resources that can help you learn what services are available where you live or plan on living.

If you think you need assistance paying for long-term care services, contact your local Home and Community Services (HCS) office. Telephone numbers for the HCS regional offices are on the back of this booklet. Call the regional office nearest you and they will direct you to the nearest local office.

### Home and Community Services staff can help you:

- Figure out what you need.
- Understand what services are in your community.
- Identify which services you are financially and functionally eligible to receive.
- Arrange for services.
- Follow-up to make sure you continue to receive appropriate, quality services.

People 60 years of age and older will find an excellent resource in their local Senior Information and Assistance (I&A) office. I&A provides local information about senior services. I&A staff can talk with you about the cost of services, how to get those services, filling out forms, and what benefits you may be eligible for. To find the office nearest you, check your telephone directory yellow pages under “senior services” or on the Internet at [www.adsa.dshs.wa.gov/resources/clickmap.htm](http://www.adsa.dshs.wa.gov/resources/clickmap.htm).



### Video Available

A free video is available that offers a visual tour through different residential care facility options. The video allows you to get a clearer picture of care setting options.



To see the 15-minute video, *Options: You Have a Choice*, call your local HCS office (number on the back of this booklet), ask your HCS case manager, or call 1-800-422-3263 and a video can be mailed to you.



Visit the Aging and Disability Services Administration's website at [www.adsa.dshs.wa.gov](http://www.adsa.dshs.wa.gov)

Your local library and the Internet are also excellent resources for your research.

If you are looking for help for an older person in another state, the Eldercare Locator is a nationwide directory service that can help you. Call 1-800-677-1116 or visit them on the web at [www.eldercare.gov](http://www.eldercare.gov).

## Possible Services Available

The following is a list of services that may be available in your community. Certain eligibility rules apply and which services are available varies depending on where you live. Either of the organizations listed on the previous page can help you sort out what is available in your area.

### Adult Day Care

Adult day care is a supervised daytime program for adults with medical or disabling conditions who do not require the level of care provided by a registered nurse or licensed rehabilitative therapist. Services include personal care, social services and activities, education, routine health monitoring, general therapeutic activities, a nutritious meal and snacks, supervision and/or protection for adults who require it, coordination of transportation, first aid, and emergency care.

### Adult Day Health

Adult day health is a supervised daytime program providing skilled nursing and rehabilitative therapy services in addition to adult day care. An adult day health center provides skilled nursing services, rehabilitative therapy such as physical therapy, occupational therapy or speech-language therapy, brief psychological and/or counseling services and all of the services listed for adult day care above.



## **Case Management**

Case management begins when a social worker or nurse does a comprehensive assessment of your needs and develops a detailed plan of services. A case manager coordinates care, provides follow-up, and helps make sure the correct services are being provided.

A further enhancement to case management is nursing services. Nursing services provide health-related consultation to the social worker or case manager and may provide referrals to health-related services.

## **Environmental Modifications**

Physical adaptations, such as ramps, grab-bars, widened doorways, modified bathrooms, or special systems to accommodate medical equipment, are made in your home.

## **Health Screening (age 60 or older)**

Preventive health measures are provided including a general health assessment, limited physical examination, and selected laboratory tests.

## **Home Health Care**

In-home health care (monitoring, treatments, therapies, medications, exercises) is authorized by a physician and provided by nurses, therapists, or trained aides.

## **Hospice**

Medical services, home care, social services, and counseling are provided to terminally-ill patients and their families. A doctor's referral is required.

## **Minor Household Repairs (age 60 or older)**

Home or apartment repairs/modifications are made to maintain your health and safety.







The goal of the PACE program is to help you remain in your home as long as possible.



## **Nurse Delegation**

In this program, a registered nurse trains and supervises a nursing assistant to do routine health care tasks for you. With a nursing assistant trained to do certain tasks, you can get the care you need where you live. There are rules about what types of care can and cannot be delegated and the nursing assistant must successfully complete a class before doing a delegated task.

## **Personal Care Services**

Help with personal care (tasks such as bathing, dressing, toileting, walking) is provided.

## **Personal Emergency Response System (PERS)**

An electronic device is provided that allows people to get help in an emergency. The system is connected to a phone or the person may also wear a portable “help” button. When activated, staff at a response center will call 911 and/or take whatever action has been set-up ahead of time.

## **Program of All-Inclusive Care for the Elderly (PACE)**

The goal of the PACE program is to help you remain in your home as long as possible. PACE works with each individual to provide and coordinate the services you need to meet your current and future physical, medical, and social needs.

PACE services are provided to you by an interdisciplinary team. Depending on your needs, a social worker, doctor, therapist, nurse, home care worker, driver, dietitian, and other service providers work together to offer the following types of services:

- prescription medications
- medical and specialist services
- hospital, emergency, and nursing home care
- housing, personal care, and chore services
- adult day health, transportation, and meals
- vision, dental, and hearing benefits

- physical, occupational, and speech therapies
- durable medical equipment
- any other services you may need

When you can no longer stay at home, PACE helps you find the best care setting option for your needs. After you move, PACE continues to provide and coordinate all the services you need.

As of September 2003, PACE is only available in King County. If you are interested in learning more about the PACE program, visit <http://cms.hhs.gov/pace> or [www.natlpaceassn.org](http://www.natlpaceassn.org). To see if it will be offered in your area, call your local HCS office (see the back of this booklet for the telephone number).

### **Respite Care**

Respite care provides relief for caregivers of adults with functional disabilities. Respite services can be arranged through the Family Caregiver Support Program (FCSP), home health agencies, adult family homes, boarding homes, adult day care, nursing facilities, or family, friends, and volunteers.

### **Senior Centers**

These are community facilities where older people can meet, share a meal, receive services, and participate in recreational activities.

### **Self-Directed Care**

An adult with a functional disability living in his/her own home can direct and supervise a paid personal care aide to help with health care tasks that he/she can't do because of their disability. Examples of self-directed care tasks include medications, bowel programs, bladder catheterization, and wound care. Self-directed care supports an individual's autonomy and choice and often allows him/her to stay in their own home longer.

### **Senior Meals (age 60 or if spouse is 60 or older)**

Nutritious meals and other dietary services are provided in a group setting or delivered to people not able to leave their home.



### **The Family Caregiver Support Program**

The Family Caregiver Support Program (FCSP) provides support services for family and other unpaid caregivers who care for adults with functional disabilities. FCSP offers specialized information and help getting services, caregiver training, counseling, support groups, and respite care.

Some eligibility rules apply and services vary by geographic area. Contact your local Area Agency on Aging (AAA) office for more information. Look for the telephone number of your local AAA office in the phone book under "Senior Services", on the Internet at

[www.adsa.dshs.wa.gov/resources/aaa.htm](http://www.adsa.dshs.wa.gov/resources/aaa.htm) or call 1-800-422-3263.



To learn more about choosing care in an adult family home or boarding home, order a *Guide to Choosing Care in an Adult Family Home or Boarding Home*, DSHS 22-707x. See the back cover for ordering information or visit the website at:

[www.adsa.dshs.wa.gov](http://www.adsa.dshs.wa.gov)



## Transportation

Transportation to and from social services, medical services, meal programs, senior centers, shopping, and recreational activities is provided.

## Volunteer Chore Services

Volunteers help with household chores, shopping, moving, minor home repair, yard care, personal care, and transportation.

# When You Can No Longer Stay at Home

If you can no longer get the care you need at home, a residential care facility might better meet your physical, medical, and social needs. Below is some helpful information about possible residential care facility options.

## Adult family homes

Adult family homes are residential, neighborhood homes licensed by Washington State to care for two to six people. Adult family homes provide lodging, meals, laundry, and organized social activities or outings. They also provide necessary supervision, assist with personal care (getting dressed, bathing, etc.) and help with medications. Some provide nursing care or may specialize in serving people with mental health problems, developmental disabilities, or dementia.

## Boarding homes

Boarding homes are larger facilities licensed by Washington State to care for seven or more people. Boarding homes provide lodging, meal services, assistance with personal care, and general supervision of residents. Some provide limited nursing care or may specialize in serving people with mental health problems, developmental disabilities, or dementia.

Boarding homes that provide care for state-funded clients are contracted under the following categories. These categories are helpful to understand because they tell you what options or services a boarding home would provide.

## **Adult Residential Care**

Adult Residential Care (ARC) services include lodging, meal services, general supervision of residents, and assistance with personal care.

## **Enhanced Adult Residential Care**

Enhanced Adult Residential Care (EARC) services include everything provided through an ARC contract (see above) plus limited nursing services.

## **Assisted Living**

Assisted Living (AL) services include everything provided through an EARC contract (see above) plus offering residents private apartment-like units with a private bath and kitchen area.

## **Nursing facilities (homes)**

Nursing facilities provide 24-hour supervised nursing care, personal care, therapy, nutrition management, organized activities, social services, room, board, and laundry. Nursing facilities also offer short-term rehabilitation services.

## **Nursing facility care options**

Increased availability of residential care setting and service options have changed how nursing facilities are used by many people today. Entering a nursing facility no longer means you stay there forever. People also go to a nursing facility for rehabilitation or for short-term, intensive nursing care. Often people get better or decide they want to return home and get services there.

As soon as your doctor discusses a possible need for nursing facility care, start looking at your options. Depending on your situation, talk to a hospital discharge planner, nursing facility discharge planner, your local Senior Information and Assistance office, or your HCS case manager.

If someone living in any residential care facility needs help resolving a care or service problem, call the State Long-Term Care Ombudsman toll-free at 1-800-562-6028.

If you have a concern regarding abuse or neglect of an adult, please see the inside of the back cover of this booklet for more information.





### **Nursing facility case management**

If you are eligible for Medicaid, a HCS social worker or nurse can work with you to assess your health care needs and develop a plan of services that would let you return home (or to an adult family or boarding home).

### **Income exemption**

If you are likely to return home within six months, you may keep part of your income to keep your home or apartment. Your doctor must verify your likely return home.

### **Discharge allowance**

A one-time discharge allowance can help you pay for deposits and set up housekeeping after a stay in a nursing home. For more information, contact your local HCS office (telephone numbers are on the back cover of this booklet) or your HCS case manager if you already have one.

### **Finding a residential care facility**

To find a listing of residential care facilities in your county:

- Visit [www.adsa.dshs.wa.gov](http://www.adsa.dshs.wa.gov). The names, addresses and telephone numbers of Washington state adult family homes, boarding homes and nursing facilities are available on-line.
- Call 1-800-372-0186 if you have a fax machine. Follow the directions given when you call, and the information will be faxed to you.
- Ask at your local HCS office.
- Contact the Senior Information and Assistance local office.
- Call the Eldercare Locator at 1-800-677-1116 or visit them on the web at [www.eldercare.gov](http://www.eldercare.gov).



## Paying for Long-Term Care

Another question you may have is how to pay for long-term care. Many people pay privately for long-term care services. There are also financial programs that pay all or part of the costs for people who qualify because of income or other reasons.

### Medicare

Medicare is a federally-funded, health insurance program for people 65+, certain people under the age of 65 with disabilities, and people of any age living with permanent kidney failure. It pays for many health care expenses but does not cover them all.

Medicare has limits on the length of time and the circumstances under which it pays for care. Medicare covers only medically “reasonable and necessary” care and does not cover custodial care (personal care that helps you with things like bathing, dressing, etc.).

Contact a Social Security Administration office for a Medicare application and more information about the program. You can find the number in the government section of a telephone book under “United States” or at [www.ssa.gov](http://www.ssa.gov).

You can also call the Statewide Health Insurance Benefits Advisors (SHIBA) for free assistance. SHIBA volunteers are trained by Insurance Commissioner’s staff to educate and counsel consumers on a wide range of health insurance options and issues. Their services are impartial and free. To locate the SHIBA volunteer nearest you, call 1-800-397-4422 or visit their website at [www.insurance.wa.gov/shibahelpline.htm](http://www.insurance.wa.gov/shibahelpline.htm). You will also find a variety of helpful consumer publications.

Medicaid and Medicare are NOT the same:

- There are no income or resource requirements for Medicare.
- For Medicaid you must meet income and resource eligibility.







### **Veteran's benefits**

If you are a wartime veteran or surviving spouse (married at the time of the veteran's death), you may be eligible for a pension health insurance or long-term care through the Department of Veterans' Affairs (VA). Also, the dependent parent of a veteran killed in service or who dies of a service-connected disability may be eligible for VA Dependency and Indemnity Compensation.

If you have any relationship to a veteran, call the Department of Veterans' Affairs for more information. The toll-free number is 1-800-562-2308.

### **Long-term care Insurance**

Some people have purchased long-term care insurance that pays for services. Check your policy carefully to see what is covered. Call SHIBA for more information (see contact information on page 11).

### **Medicaid**

Medicaid is a program that uses both state and federal money to help you pay for medical services. It is for people with limited income and resources, such as savings or property. Medicaid can pay for medical services in your own home or in a residential care facility including an adult family home, a boarding home contracted with DSHS, or a nursing facility.

### **Applying for Medicaid**

If you are 18 or older, you, or someone acting for you, can apply for Medicaid through your local Home and Community Services (HCS) office. The map on the back of this brochure lists the HCS toll-free, regional numbers. Call to ask for the telephone number and address of your local HCS office. This information is also available at [www.adsa.dshs.wa.gov](http://www.adsa.dshs.wa.gov).

Call or visit the HCS office. Tell them you would like an application form to apply for Medicaid to help pay for long-term care services. The application form can be:

- mailed to you;
- picked up at the HCS office;
- downloaded and printed off the Internet at:  
[http://www1.dshs.wa.gov/dshsforms/forms/14\\_001PDF](http://www1.dshs.wa.gov/dshsforms/forms/14_001PDF).

There are three main parts to the application process, including:

- filling out the application;
- a financial review to determine your financial eligibility;
- an assessment of your personal care needs to determine functional eligibility for services.

Fill out and return the application form. Follow the instructions and answer all the questions on the application. If you need help filling out the application, contact your local HCS office or your local Senior Information and Assistance office (I&A).

Information you will need to provide includes:

- A Social Security number
- Proof of identification
- Proof of income
- Documentation of resources (such as bank statements, property tax statements, life insurance)
- Immigration or alien documents

### **Additional support**

If your primary language is not English or you have mental, physical, hearing or sight issues that makes it difficult to understand what is happening during the application process, you may ask a HCS staff person for further assistance.

Accommodations may include (but are not limited to): Braille materials, written materials translated or on computer disk, large print materials, use of assisted listening devices, TTYs, or a qualified/certified interpreter or reader.



If you are applying for someone else, be sure the applicant signs a consent form giving you permission to represent them during the application process.

Be prepared to answer questions about the applicant's personal and financial situation.

Don't be afraid to ask questions. Write down the answers so you can remember everything later. Write down the names of people you talk with in case you need to speak with them again.

HCS/DSHS employees can explain the rules but are not able to give you personal, financial or legal advice. They will recommend that you consult an attorney who understands Medicaid rules if you need help with a decision.

Your local Information and Assistance Office can help you locate legal assistance. Their phone number is in the telephone directory Yellow Pages under “Senior Citizens” or “Disabled Persons” or visit [www.adsa.dshs.wa.gov/resources/clickmap.htm](http://www.adsa.dshs.wa.gov/resources/clickmap.htm).

### **Financial review**

You will talk to a HCS financial services specialist as part of your application process. At that time, you can explain in more detail the answers on your application form. The next several pages of this booklet will give you more information about the income and resource eligibility limits the financial services specialist will be reviewing with you.

If you can't provide all of the necessary information during your in-person, mail, or telephone interview, you will receive a letter telling you what you need to provide and when. Get the information to the financial services specialist by the requested date. If you need more time or help getting the information, let your financial services specialist know.

### **Assessing your care needs**

During your application process, a social worker or nurse will visit you at your residence. The social worker will work with you to determine what help you need with your personal care and what services you are eligible to receive. This is called an assessment. This assessment is used to determine your functional eligibility for services.

### **Income and resources eligibility limits**

To receive Medicaid for long-term care services in your own home or in a residential care facility, you must meet various income and resource eligibility requirements.

Be sure the service you choose will accept payment from Medicaid. Most residential care facilities accept payment from Medicaid, but some do not. If you are considering a particular residential facility, ask them if they accept Medicaid payments.

Income and resource limits are set by law and change each year. The HCS office will have current information.

## **Income**

Medicaid income limits vary depending on the services you need, your living situation, and your marital status.

If you receive Medicaid to pay for your care, you may have to contribute some of your income towards the cost of your care. This is called your participation. Your participation amount depends on the services you receive, your marital status, and your income.

Part of your available income may go towards a spousal allowance. A spousal allowance is used to bring your spouse's income up to established federal government standards. Part of your available income may also go to support dependent relatives. Receiving a spousal allowance depends on the program, your needed services, and your living situation.

If you live at home, part of your available income can be kept for home maintenance (such as rent, utilities, and taxes) and personal needs. If you are in a residential care facility, you keep some of your income for your personal needs.

If you will be staying in a nursing facility a short time, you may be able to keep additional income to help maintain your home for your return. Ask about the "Housing Maintenance Exemption" when you apply.

## **Resources**

Resources include money, assets, or property that are available to pay for your care. You must declare all resources. All resources of both spouses will be considered together to determine eligibility for Medicaid. Examples include, cash, bank accounts, stocks and bonds, retirement plans, trusts, life insurance policies, sales contracts, vehicles and land.

Contributing some of your income towards the cost of your care is called your participation.



Do you really need nursing home care? With the proper support, you may not need to go to a nursing home. Before you enter a nursing home, meet with a HCS social worker or nurse. They will talk with you, assess your care needs, and help you decide what is best for you.

Federal law states that certain gifts or transfers made to qualify for Medicaid are subject to penalties. State law also contains penalties for the person who receives resources transferred for less than adequate compensation.

Certain “exempt” resources are not counted toward the resource limits. Exempt resources can include your home, household goods and personal effects, some real estate sales contracts, a car, life insurance with a face value not more than \$1,500, burial plots, and most prepaid burial plans.

Resource limits vary depending on your marital status and other factors. Be sure to ask when you apply.

### **Transferring resources**

Under state and federal law, the state must review transfers of resources that take place before the date you apply for Medicaid.

The state looks back 60 months for transfers into trusts and 36 months for all other transfers. If you did not receive fair market value for the resource, you may not be eligible to receive Medicaid for a period of time after making the transfer.

You can transfer your home without penalty to your:

- spouse;
- sibling who has an equity interest in the home and who has lived there at least one year immediately before the date of Medicaid eligibility;
- dependent child who is under 21 years of age;
- child who is blind or disabled; or
- adult child who has lived with you and provided care to allow you to remain at home for the past two years.

### **What to expect when your application is approved**

If your application is approved, you will get a letter saying you are approved for Medicaid coverage. You may get two letters, one from your financial services specialist and one from your social worker.

The letter(s) will tell you how much of your income you may keep for your personal needs, spousal support, home maintenance allowance, medical insurance premiums, and necessary medical expenses not covered by Medicaid.

It will also tell you how much you must pay your provider to participate in the cost of your care. You are required to pay these participation costs.

If you are eligible for Medicaid, you will receive a Medicaid Identification Card on the first of each month. It pays for medical services covered under Medicaid such as prescription medications and doctor visits. It also covers medical services not provided by a nursing facility or residential care facility.

DSHS will review your financial eligibility to receive benefits at least once a year.

### **Recovery of funds from your estate**

By law, the state may recover (be paid back) payments DSHS made for all Medicaid and long-term care services the recipient received prior to their death. Payment is taken from the recipient's estate (assets owned or had an interest in at the time of death). This is called Estate Recovery.

Washington State will recover the cost of all Medicaid funded services (federal and state funded programs) and long-term care services from age 55, including:

- Doctor;
- Hospital;
- Prescription drugs;
- Medical appliances;
- All other medical services;
- Nursing home services;
- COPES;
- Medically Needy Residential and In-Home Services;
- Medicaid personal care services;
- Adult day health;
- Private duty nursing;
- Managed Care Premiums;
- Medicare Premiums for individuals also receiving Medicaid; and
- Medicare Savings program services for individuals also receiving Medicaid.





## Resident personal funds held by a facility

If a residential care facility holds any personal funds of a resident who dies, the funds must be given within 45 days to:

- The individual or probate jurisdiction administering the resident's estate or
- The Office of Financial Recovery. This office may release funds to pay for burial costs.

Washington State will also recover the cost of state-only funded long-term care services received at any age, including:

- Chore;
- Adult family home;
- Adult residential care; and
- Related hospital services and prescription drug costs.

Collection only applies to assets the recipient owned or had an interest in at the time of death. It does not apply to property solely owned by a spouse or child. The state will not begin recovery efforts until after the death of the person who received Medicaid or state-only funded services, during the life of a surviving spouse, or while a surviving child is under age 21, blind or disabled. Hardship provisions to protect dependent heirs may apply.

Various exemptions have existed over the years. DSHS will apply whatever estate recovery law existed on the date that benefits were received.

DSHS may file a lien or make a claim against any property that is included in the deceased recipient's estate. Before filing a lien against real property, DSHS will give notice and an opportunity for a hearing to the estate's personal representative or any other established titled owner of the property.

For more information, consult an attorney with experience in Medicaid law. You can also contact Coordinated Legal Education, Advice, and Referral toll-free at 1-888-201-1014. They have a web site in English and Spanish at [www.nwjustice.org](http://www.nwjustice.org).



## You Have a Choice...

This booklet has given you information on exploring your long-term care needs, what services and residential care facility options are available, and options for paying for your long-term care.

Reading through this booklet is an excellent start. Now you know there are many people, organizations, and resources available to help.

## To learn more about...

caregiving and long-term care topics visit:

[www.adsa.dshs.wa.gov](http://www.adsa.dshs.wa.gov)



### To find:

- Free brochures and booklets on caregiving and long-term care topics.
- More information on the Family Caregiver Support Program.
- Telephone numbers and addresses of local offices working with seniors.
- A list of adult family homes boarding homes or nursing homes by county.
- Frequently asked questions and answers about long-term care.

# Ordering Publications

You may order this booklet and other DSHS publications through the Department of Printing's (DOP) General Store. Go to the DOP's website at:

[www.prt.wa.gov](http://www.prt.wa.gov)



Publication requests may also be placed:

- By e-mail at [fulfillment@prt.wa.gov](mailto:fulfillment@prt.wa.gov)
- By phone at (360) 570-5024
- By fax at (360) 586-8831

Make sure to include the name of the publication, publication number (DSHS 22-xxx), and a contact name and street mailing address for orders placed by e-mail, phone, or fax.

## We are all partners against adult abuse

Abuse of vulnerable adults (people who need help to care for themselves) can happen anytime, anywhere. DSHS investigates alleged abuse, neglect, exploitation, or abandonment of vulnerable adults.

Call the telephone number listed below for help if you or someone you know is:

- not being cared for properly
- being hurt physically or mentally
- being financially exploited in any way

If you suspect abuse, neglect, or exploitation of a vulnerable adult:

**Call DSHS toll-free**



It is the policy of the Department of Social and Health Services that no person shall be subjected to discrimination in this agency or its contractors because of race, color, national origin, sex, age, religion, creed, marital status, disabled veteran status or Vietnam era Veteran status, or the presence of any physical, mental, or sensory disability.

Photos by Carole Huff

